

Handwritten: #FW 1635 Box Sec 2  
PTO/SB/21 (09-04)

<b>PTO TRANSMITTAL FORM</b> MAY 30 2006 <small>Do not be used for correspondence after initial filing</small>	Application Number	09/301,380
	Filing Date	April 27, 1999
	First Named Inventor	Murphy, Gerald P.
	Art Unit	1635
	Examiner Name	John B. Ashen
	Attorney Docket Number	20093A-002100US
Total Number of Pages in This Submission		

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input checked="" type="checkbox"/> Drawing(s) Replacement Sheet (35/36)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Paper copy of Sequence Listing (pp. 1-16);
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	CRF (1 disk); and
	<input type="checkbox"/> Landscape Table on CD	Return Postcard
<input type="checkbox"/> Certified Copy of Priority Document(s)	<b>Remarks</b> The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Nicholas V. Sherbina		
Date	May 25, 2006	Reg. No.	54,443

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Signature			
Typed or printed name	Masha M. Martinenko	Date	May 25, 2006